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| FORM PTO-1390 (Modified)<br>(REV 11-2000)   |  | U.S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE |  | ATTORNEY/DOCKET NUMBER<br><b>220152-001CT</b>                  |
| TRANSMITTAL LETTER TO THE UNITED STATES<br>DESIGNATED/ELECTED OFFICE (DO/EO/US)<br>CONCERNING A FILING UNDER 35 U.S.C. 371  |  |   |  | U.S. APPLICATION NO. (IF KNOWN, SEE 37 CFR<br><b>10/069951</b> |
| INTERNATIONAL APPLICATION NO.<br><b>PCT/FR01/02189</b>  | INTERNATIONAL FILING DATE<br><b>06 JULY 2001</b> | PRIORITY DATE CLAIMED<br><b>07 JULY 2000</b>            |  |  |
| TITLE OF INVENTION<br><b>CROSSLINKED RESIN AND PROCESS FOR THE MANUFACTURE OF OXIDES USING THIS CROSSLINKED RESIN</b>   |  |   |  |  |
| APPLICANT(S) FOR DO/EO/US<br><b>Philippe GAUCHER</b>  |  |   |  |  |
| Applicant herewith submits to the United States Designated/Elected Office (DO/EO/US) the following items and other information:   |  |   |  |  |
| <ol style="list-style-type: none"> <li>1. <input checked="" type="checkbox"/> This is a <b>FIRST</b> submission of items concerning a filing under 35 U.S.C. 371.</li> <li>2. <input type="checkbox"/> This is a <b>SECOND</b> or <b>SUBSEQUENT</b> submission of items concerning a filing under 35 U.S.C. 371.</li> <li>3. <input checked="" type="checkbox"/> This is an express request to begin national examination procedures (35 U.S.C. 371(f)). The submission must include items (5), (6), (9) and (24) indicated below.</li> <li>4. <input type="checkbox"/> The US has been elected by the expiration of 19 months from the priority date (Article 31).</li> <li>5. <input checked="" type="checkbox"/> A copy of the International Application as filed (35 U.S.C. 371 (c) (2))             <ol style="list-style-type: none"> <li>a. <input type="checkbox"/> is attached hereto (required only if not communicated by the International Bureau).</li> <li>b. <input checked="" type="checkbox"/> has been communicated by the International Bureau.</li> <li>c. <input type="checkbox"/> is not required, as the application was filed in the United States Receiving Office (RO/US).</li> </ol> </li> <li>6. <input checked="" type="checkbox"/> An English language translation of the International Application as filed (35 U.S.C. 371(c)(2)).             <ol style="list-style-type: none"> <li>a. <input checked="" type="checkbox"/> is attached hereto.</li> <li>b. <input type="checkbox"/> has been previously submitted under 35 U.S.C. 154(d)(4).</li> </ol> </li> <li>7. <input checked="" type="checkbox"/> Amendments to the claims of the International Application under PCT Article 19 (35 U.S.C. 371 (c)(3))             <ol style="list-style-type: none"> <li>a. <input type="checkbox"/> are attached hereto (required only if not communicated by the International Bureau).</li> <li>b. <input type="checkbox"/> have been communicated by the International Bureau.</li> <li>c. <input type="checkbox"/> have not been made; however, the time limit for making such amendments has NOT expired.</li> <li>d. <input checked="" type="checkbox"/> have not been made and will not be made.</li> </ol> </li> <li>8. <input type="checkbox"/> An English language translation of the amendments to the claims under PCT Article 19 (35 U.S.C. 371(c)(3)).</li> <li>9. <input checked="" type="checkbox"/> An oath or declaration of the inventor(s) (35 U.S.C. 371 (c)(4)).</li> <li>10. <input type="checkbox"/> An English language translation of the annexes to the International Preliminary Examination Report under PCT Article 36 (35 U.S.C. 371 (c)(5)).</li> <li>11. <input type="checkbox"/> A copy of the International Preliminary Examination Report (PCT/IPEA/409).</li> <li>12. <input checked="" type="checkbox"/> A copy of the International Search Report (PCT/ISA/210).</li> </ol> |  |   |  |  |
| Items 13 to 20 below concern document(s) or information included:   |  |   |  |  |
| <ol style="list-style-type: none"> <li>13. <input checked="" type="checkbox"/> An Information Disclosure Statement under 37 CFR 1.97 and 1.98.</li> <li>14. <input type="checkbox"/> An assignment document for recording. A separate cover sheet in compliance with 37 CFR 3.28 and 3.31 is included.</li> <li>15. <input checked="" type="checkbox"/> A <b>FIRST</b> preliminary amendment.</li> <li>16. <input type="checkbox"/> A <b>SECOND</b> or <b>SUBSEQUENT</b> preliminary amendment.</li> <li>17. <input type="checkbox"/> A substitute specification.</li> <li>18. <input type="checkbox"/> A change of power of attorney and/or address letter.</li> <li>19. <input type="checkbox"/> A computer-readable form of the sequence listing in accordance with PCT Rule 13ter.2 and 35 U.S.C. 1.821 - 1.825.</li> <li>20. <input type="checkbox"/> A second copy of the published international application under 35 U.S.C. 154(d)(4).</li> <li>21. <input type="checkbox"/> A second copy of the English language translation of the international application under 35 U.S.C. 154(d)(4).</li> <li>22. <input type="checkbox"/> Certificate of Mailing by Express Mail</li> <li>23. <input checked="" type="checkbox"/> Other items or information:</li> </ol>   |  |   |  |  |
| <b>Notice of Priority / PCT/IB/304 / PCT/IB/308</b><br><b>PTO-1449 / Drawings (3 sheets)</b>  |  |   |  |  |

| U.S. APPLICATION NO. (IF KNOWN, SEE 37 CFR 1.492(e))<br><b>10/069951</b>  | INTERNATIONAL APPLICATION NO.<br><b>PCT/FR01/02189</b> | ATTORNEY'S DOCKET NUMBER<br><b>220152US0PCT</b>               |                          |              |      |              |           |   |           |                    |         |   |           |  |  |  |                          |               |
|---|--|---|--------------------------|--------------|------|--------------|-----------|---|-----------|--------------------|---------|---|-----------|--|--|--|--------------------------|---------------|
| 24. The following fees are submitted:<br><b>BASIC NATIONAL FEE (37 CFR 1.492 (a) (1) - (5)) :</b>   |  | <b>CALCULATIONS PTO USE ONLY</b>                              |                          |              |      |              |           |   |           |                    |         |   |           |  |  |  |                          |               |
| <input type="checkbox"/> Neither international preliminary examination fee (37 CFR 1.482) nor international search fee (37 CFR 1.445(a)(2)) paid to USPTO and International Search Report not prepared by the EPO or JPO ..... <b>\$1040.00</b><br><input checked="" type="checkbox"/> International preliminary examination fee (37 CFR 1.482) not paid to USPTO but International Search Report prepared by the EPO or JPO ..... <b>\$890.00</b><br><input type="checkbox"/> International preliminary examination fee (37 CFR 1.482) not paid to USPTO but international search fee (37 CFR 1.445(a)(2)) paid to USPTO ..... <b>\$740.00</b><br><input type="checkbox"/> International preliminary examination fee (37 CFR 1.482) paid to USPTO but all claims did not satisfy provisions of PCT Article 33(1)-(4) ..... <b>\$710.00</b><br><input type="checkbox"/> International preliminary examination fee (37 CFR 1.482) paid to USPTO and all claims satisfied provisions of PCT Article 33(1)-(4) ..... <b>\$100.00</b> |  | <b>\$890.00</b>   |                          |              |      |              |           |   |           |                    |         |   |           |  |  |  |                          |               |
| <b>ENTER APPROPRIATE BASIC FEE AMOUNT =</b>   |  | <b>\$890.00</b>   |                          |              |      |              |           |   |           |                    |         |   |           |  |  |  |                          |               |
| Surcharge of <b>\$130.00</b> for furnishing the oath or declaration later than<br>months from the earliest claimed priority date (37 CFR 1.492 (e)).<br><input type="checkbox"/> 20 <input type="checkbox"/> 30   |  | <b>\$0.00</b>   |                          |              |      |              |           |   |           |                    |         |   |           |  |  |  |                          |               |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 25%;">CLAIMS</th> <th style="width: 25%;">NUMBER FILED</th> <th style="width: 25%;">NUMBER EXTRA</th> <th style="width: 25%;">RATE</th> </tr> </thead> <tbody> <tr> <td>Total claims</td> <td>20 - 20 =</td> <td>0</td> <td>x \$18.00</td> </tr> <tr> <td>Independent claims</td> <td>2 - 3 =</td> <td>0</td> <td>x \$84.00</td> </tr> <tr> <td colspan="3">Multiple Dependent Claims (check if applicable).</td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </tbody> </table>   |  | CLAIMS  | NUMBER FILED             | NUMBER EXTRA | RATE | Total claims | 20 - 20 = | 0 | x \$18.00 | Independent claims | 2 - 3 = | 0 | x \$84.00 | Multiple Dependent Claims (check if applicable). |  |  | <input type="checkbox"/> | <b>\$0.00</b> |
| CLAIMS  | NUMBER FILED   | NUMBER EXTRA  | RATE                     |              |      |              |           |   |           |                    |         |   |           |  |  |  |                          |               |
| Total claims  | 20 - 20 =  | 0   | x \$18.00                |              |      |              |           |   |           |                    |         |   |           |  |  |  |                          |               |
| Independent claims  | 2 - 3 =  | 0   | x \$84.00                |              |      |              |           |   |           |                    |         |   |           |  |  |  |                          |               |
| Multiple Dependent Claims (check if applicable).  |  |   | <input type="checkbox"/> |              |      |              |           |   |           |                    |         |   |           |  |  |  |                          |               |
| <b>TOTAL OF ABOVE CALCULATIONS =</b>  |  | <b>\$890.00</b>   |                          |              |      |              |           |   |           |                    |         |   |           |  |  |  |                          |               |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27). The fees indicated above are reduced by 1/2.   |  | <b>\$0.00</b>   |                          |              |      |              |           |   |           |                    |         |   |           |  |  |  |                          |               |
| <b>SUBTOTAL =</b>   |  | <b>\$890.00</b>   |                          |              |      |              |           |   |           |                    |         |   |           |  |  |  |                          |               |
| Processing fee of <b>\$130.00</b> for furnishing the English translation later than<br>months from the earliest claimed priority date (37 CFR 1.492 (f)).<br><input type="checkbox"/> 20 <input type="checkbox"/> 30  |  | <b>\$0.00</b>   |                          |              |      |              |           |   |           |                    |         |   |           |  |  |  |                          |               |
| <b>TOTAL NATIONAL FEE =</b>   |  | <b>\$890.00</b>   |                          |              |      |              |           |   |           |                    |         |   |           |  |  |  |                          |               |
| Fee for recording the enclosed assignment (37 CFR 1.21(h)). The assignment must be<br>accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31) (check if applicable).  |  | <input type="checkbox"/><br><b>\$0.00</b>                     |                          |              |      |              |           |   |           |                    |         |   |           |  |  |  |                          |               |
| <b>TOTAL FEES ENCLOSED =</b>  |  | <b>\$890.00</b>   |                          |              |      |              |           |   |           |                    |         |   |           |  |  |  |                          |               |
|   |  | <b>Amount to be:<br/>refunded</b> \$<br><b>charged</b> \$<br> |                          |              |      |              |           |   |           |                    |         |   |           |  |  |  |                          |               |
| a. <input checked="" type="checkbox"/> A check in the amount of <b>\$890.00</b> to cover the above fees is enclosed.<br>b. <input type="checkbox"/> Please charge my Deposit Account No. _____ in the amount of _____ to cover the above fees.<br>A duplicate copy of this sheet is enclosed.<br>c. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. <b>15-0030</b> A duplicate copy of this sheet is enclosed.<br>d. <input type="checkbox"/> Fees are to be charged to a credit card. <b>WARNING: Information on this form may become public. Credit card information should not be included on this form.</b> Provide credit card information and authorization on PTO-2038.  |  |   |                          |              |      |              |           |   |           |                    |         |   |           |  |  |  |                          |               |
| <b>NOTE: Where an appropriate time limit under 37 CFR 1.494 or 1.495 has not been met, a petition to revive (37 CFR 1.137(a) or (b)) must be filed and granted to restore the application to pending status.</b>  |  |   |                          |              |      |              |           |   |           |                    |         |   |           |  |  |  |                          |               |
| SEND ALL CORRESPONDENCE TO:<br><div style="border: 1px solid black; padding: 10px; text-align: center;"> <br/> <b>22850</b><br/>         Surinder Sachar<br/>         Registration No. 34,423       </div>   |  |   |                          |              |      |              |           |   |           |                    |         |   |           |  |  |  |                          |               |
| <div style="text-align: right; margin-bottom: 10px;"> <br/> <b>SIGNATURE</b> </div> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <b>NAME</b><br/> <b>24,618</b><br/> <b>REGISTRATION NUMBER</b> </div> <div style="width: 45%;"> <b>DATE</b><br/> <b>March 7 2002</b> </div> </div>  |  |   |                          |              |      |              |           |   |           |                    |         |   |           |  |  |  |                          |               |
| (703) 413-3000  |  |   |                          |              |      |              |           |   |           |                    |         |   |           |  |  |  |                          |               |